



COMMONWEALTH OF VIRGINIA
DEPARTMENT OF MINES, MINERALS AND ENERGY
DIVISION OF MINERAL MINING
900 NATURAL RESOURCES DRIVE, STE. 400
CHARLOTTESVILLE, VA 22903
TELEPHONE: (434) 951-6310

Permit No:	
Bond No:	

SURETY BOND RIDER

Increase ☐ **Decrease** ☐ **New Bond Amount:** _____

TO be attached to and form a part of Surety Company Bond No. _____
written by _____ **as SURETY**, on behalf
of _____ **as PRINCIPAL**, in the sum of
_____ (\$ _____) Dollars, in
favor of the **COMMONWEALTH of VIRGINIA, DIRECTOR, DIVISION OF MINERAL MINING**
as **OBLIGEE** executed on _____, 20____.

WHEREAS, the **OBLIGEE** issued to the **PRINCIPAL** Permit Number _____ dated
on _____, pursuant to the application of the **PRINCIPAL**,

WHEREAS, said bond and rider shall cover any and all land affected or to be affected by the
mining operation under the above-mentioned permit and revisions and renewals since the date of the
issuance of the permit,

NOW, therefore, the amount of the bond is ☐ increased ☐ decreased by
_____ (\$ _____) Dollars to a total sum of
_____ (\$ _____) Dollars, to cover the
additional/reduced cost of reclaiming all affected lands.

It is further agreed that all other terms and conditions of this bond shall remain unchanged.

SIGNED AND SEALED THIS _____ DAY OF _____, 20_____.

Permit No:	
Bond No:	

I. BY COMPANY/PRINCIPAL:

_____(SEAL) By: _____
 Company /Principal **Company/Principal Official**

 Title Date

Subscribed and sworn/affirmed to before me by _____,
 this _____ day of _____, 20____, in the City/County of _____.

_____(SEAL)
Notary Public

My Commission expires _____, 20____.

II. BY SURETY: Attach copy bearing seal of Power of Attorney or documentation supporting Corporate Officer's authority to issue surety bond.

_____(SEAL) By: _____
 Surety Name **Attorney-in-Fact**

 Date Typed name

My Power of Attorney is recorded in the Clerk's Office of the Circuit Court of _____, Virginia, in Deed Book _____, Page _____, or Instrument _____, and has not been revoked.

Attorney-in-Fact

Permit No:	
Bond No:	

AFFIDAVIT AND ACKNOWLEDGEMENT OF ATTORNEY-IN-FACT
COMMONWEALTH OF VIRGINIA

(or, alternatively, Commonwealth or State of _____) CITY/COUNTY OF _____, to wit:

I, the undersigned notary public, do certify that _____ personally appeared before me in the jurisdiction aforesaid and made oath that he is the attorney-in-fact of _____, the Surety, that he is duly authorized to execute on its behalf the foregoing Bond pursuant to the Power of Attorney noted above, and on behalf of said Surety, acknowledged the aforesaid Bond(s) as its act and deed.

Given under my hand this _____ day of _____, 20____.

_____(SEAL)

Notary Public

My Commission expires: _____, 20____.

III. BY ISSUING AGENT: 1. Attach copy of Agency License and Assignment Card from Bureau of Insurance.
2. Attach verification of individual's authority to sign on behalf of Agency

Agency Issuing Surety Bond (provide the following information):

Agency name: _____
Authorized agent: _____
Agent address: _____
Office telephone number: _____

IV. DIVISION APPROVAL:

ACCEPTED: _____ Date _____
Division of Mineral Mining